

1966

EC66-2210 Food and your Family

Constance Kies

Hazel Fox

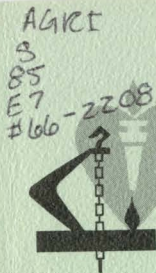
Virginia Trotter

Follow this and additional works at: <http://digitalcommons.unl.edu/extensionhist>

Kies, Constance; Fox, Hazel; and Trotter, Virginia, "EC66-2210 Food and your Family" (1966). *Historical Materials from University of Nebraska-Lincoln Extension*. 3983.

<http://digitalcommons.unl.edu/extensionhist/3983>

This Article is brought to you for free and open access by the Extension at DigitalCommons@University of Nebraska - Lincoln. It has been accepted for inclusion in Historical Materials from University of Nebraska-Lincoln Extension by an authorized administrator of DigitalCommons@University of Nebraska - Lincoln.



EC 66-2210
For Physically Limited Homemakers

FOOD and your family



Sponsored by
Nebraska Heart Association
and
Extension Service
University of Nebraska College of Agriculture and Home Economics
and U. S. Department of Agriculture Cooperating
E. F. Frolik, Dean J. L. Adams, Director

FOOD and your family..

Dr. Constance Kies
Associate Professor

Dr. Hazel Fox
Professor

Dr. Virginia Y. Trotter
Associate Dean

As a good homemaker, you are concerned about preparing meals which will meet the nutritional needs of your family. Perhaps you have some worries concerning your own special nutritional needs.

Most likely your nutritional requirements for vitamins, minerals and proteins are no different than for any other woman of your age, build and activity. However, your doctor is the only person who can tell you whether or not your physical limitation affects what you should or should not eat. Ask him!

Meals that provide adequate amounts of all needed nutrients will make you feel better. This is just as true for all the other members of your family. Unless your doctor has placed you on a special diet, check the menus you plan each day for the whole family against a good food plan designed to provide adequate amounts of nutrients.

The Basic Four Food Plan, planned by home economists of the U.S. Department of Agriculture, is probably the best food plan for the average American homemaker to use. This plan, designed around foods commonly used in ordinary homes, can be obtained by writing to the School of Home Economics, University of Nebraska.

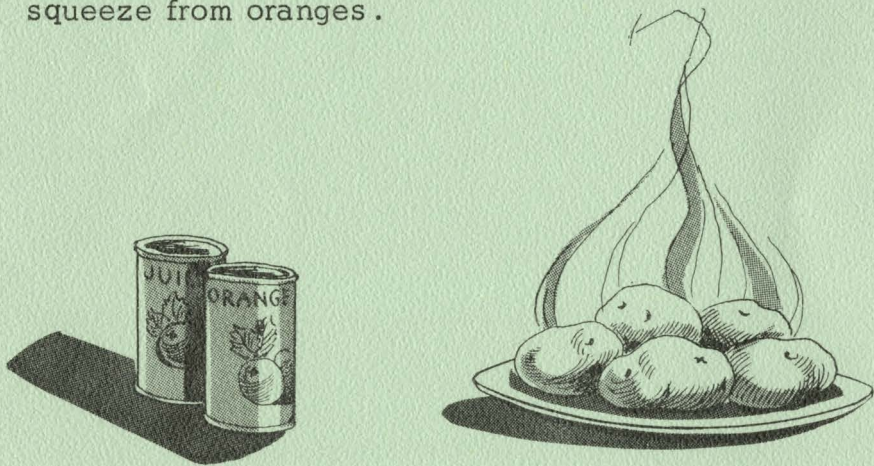
Have you found that with lowered energy or limited physical ability that it is more difficult, more time consuming, to prepare meals for your family and yourself? Why not use smart menu planning to prepare meals of equal or greater nutritional value but requiring less work. You and your family will enjoy meals more if you don't tire yourself in their preparation.

First, plan a meal typical of the kind you and your family frequently have and like. Then sit back and ask yourself these questions:

1. Which of these dishes are hard for me to prepare or require the most time, energy or work?
2. Are there ways I can prepare these foods in other dishes which will present fewer preparation problems?
3. Where can I make substitutions in this menu to make my preparation work easier and/or quicker but still keep my family happy and well-nourished?

Here are a few pointers to start your list:

Try making better and more frequent use of convenience foods - Convenience foods are usually just as nutritious (sometimes more so) and certainly speedier than conventionally prepared foods. Frozen orange juice is less expensive and just as nutritious as the fresh juice you squeeze from oranges.



Concentrate on preparing food in the form that requires the least time and energy while retaining full nutritive value--For example: baked potatoes are more nutritious and a lot less work than boiled potatoes since they don't have to be peeled.

It may be that your handicap has created some special nutritional problems for you. Remember, if your physician has placed you on a special diet, follow his advice exactly. The use of diet in helping to prevent the development of various physical symptoms or to relieve them once developed may be very important. Do not go on the advice of friends and relatives who may have had seemingly similar conditions because:

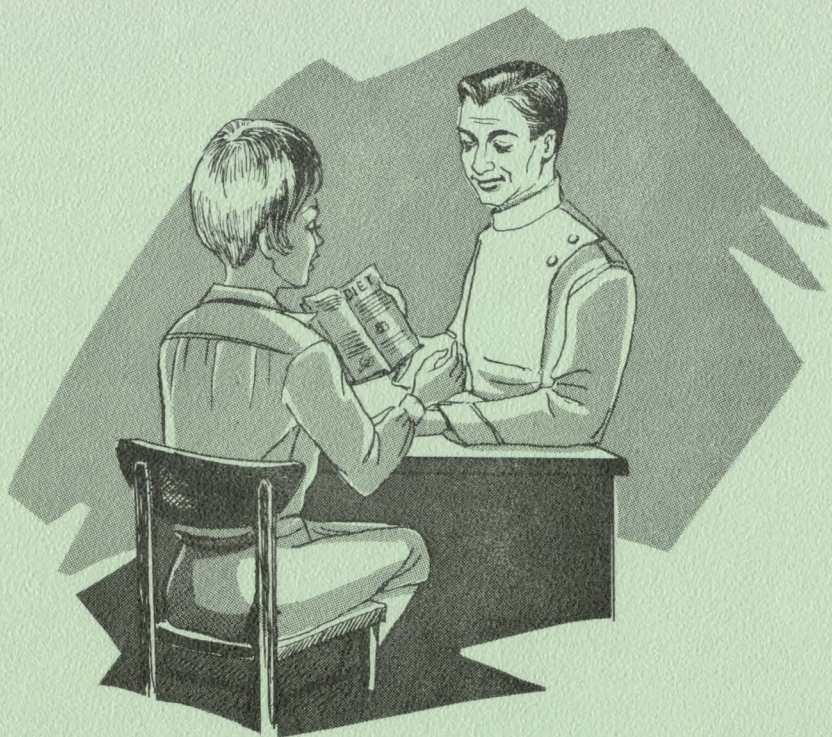
1. The use of special diets in the treatment of individuals is only a part of the treatment. This may be coupled with drug treatment or other forms of treatment. Only your doctor knows how the various parts fit together. Also, doctors may have different opinions on the use of the special diet.

2. The total treatment picture, including special diet, has been tailored for you and your special overall condition. It has been designed to fit only you. In the same way, your friend's has been tailored for her.

3. A special diet is designed to best meet the nutritional needs of the whole individual, not only for treatment of the physical abnormality. People differ in their nutritional needs. Also, several physical symptoms may occur in the same individual; hence, you can't expect a diet modeled for a person who is overweight and has cardiac insufficiency to be the same as one who is of normal weight with cardiac insufficiency.

Even more dangerous than the well-meaning advice of friends and relatives can be information from food fad-dists, misleading advertisements and patent medicine companies. Do not fall prey to anyone who says he can cure your blindness, your heart disease, your arthritis or other physical handicap by dietary means unrecognized by the medical professions.

In recent years, false claims have been made for cures of the above mentioned diseases by eating certain, special foods. For example, cherry juice to cure arthritis.



A handicapped homemaker (or any other person) may be placed on a special diet by her doctor for any of many reasons. If you are confined to a wheel chair, or are less active than you used to be, you may find that you are gaining weight. This is because the number of calories you require is dependent in part on your activity.

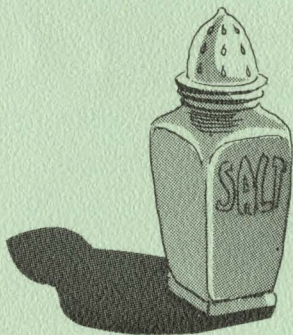
With reduced activity, less energy is used by the body; so, the diet needs to supply less energy value or calories.

If you eat more calories than your body needs, the excess amount forms fat which causes you to gain weight. Therefore, to maintain your normal weight, if your activity has been reduced, you will have to reduce the number of calories you eat.

There are many good low-calorie diets available (as well as some very poor, even dangerous ones). Some good books on low-calorie diets are listed at the end of this circular. Your physician may decide on one diet that specifically meets your needs. Be sure to check with him before starting a program to lose large amounts of weight.

There are several good health reasons for all adults to maintain their weight within the limits best for their body build and age. In addition to these you may find with lowered energy and/or limited mobility that it is easier, less tiring to accomplish your usual activities with a lower body weight. Anyhow, don't we all like to look our best--a nice figure is a good morale booster!

Do you have a cardiac condition? While overweight cannot be called the cause of all heart and blood vessel disorders, your physician may decide that you should lose weight for another reason. By reducing your weight, the amount of work your heart has to do is also reduced. For each pound of extra flesh, the heart must pump blood through additional yards of blood vessels.



There are many other special diets such as the sodium (salt) restricted diet, or modified fat diets which your physician may decide will help you. Several helpful books containing recipes for special diets are available. Some good ones are listed at the end of this booklet. Be sure to check with your physician, however, before departing in any way from his orders.

If you are placed on a special diet, do not assume that this means that this will double your work--that you will have to prepare two completely separate sets of meals, one for yourself and one for the other members of your family. You could, but with reduced energy and/or limited mobility, you probably wouldn't want to.

Therefore, get smart! Think! Use menu planning to save yourself time, work, energy and still meet everyone's nutritional needs.

First, list all the dishes you would ordinarily plan to serve your family at all meals. Then compare this list with the diet list given you by your doctor. See some overlaps? These dishes can immediately go on your menu in the amount allowed. Don't stop at this point, however. Keep on thinking.

Are there any ways that you prepare the foods which, with slight modifications, make it acceptable for your use? For example, if you are on a sodium restricted diet, cook all foods without added salt. When the food is cooked, remove your portion and then salt the remainder for the rest of the family. By this method you should be able to add several other items to the list.

Are there any substitutions you can make in the family's menu so that you can all enjoy the same dish?

Are there any of the special recipes on your list that your family might enjoy as much or more than what you originally planned? Why not try those cookies made with a plant oil instead of butter, on the whole family?

The key is integration of the food your family needs and likes with your personal dietary needs.

Always remember that nutrition through the food you eat is important. What you eat does make a difference. Eat smart for smart nutrition.

Planning Fat Controlled Meals for Unrestricted Calories; Planning Fat Controlled Meals for 1200 and 1800 Calories; Your 500 Milligram Sodium Diet - Strict Sodium Restriction; Your 1000 Milligram Sodium Diet - Moderate Sodium Restriction; Your Mild Sodium Diet. *These publications of the American Heart Association obtained by physicians prescription from your local Heart Association or from the Nebraska Heart Association, 430 South 40th Street, Omaha, Nebraska.

The Fat and Sodium Control Cookbook by A.S. Payne. 3rd ed., rev. 1965. Obtain from Little, Brown and Co., Boston, Mass.

Cooking for Special Diets by B. Nilson, 1964 Obtain from Penguin Books, Inc., Baltimore, Maryland.

Eat Well and Stay Well by A. Keyes and M. Keyes, 1959 Obtain from Doubleday and Company, Inc., Garden City, N.Y.

Everybody's Book of Modern Diet and Nutrition by H. Fleck and E. D. Munves. 2nd ed., 1959. Obtain from Dell Publishing Co., New York, N.Y.

Food Becomes You by R. M. Leverton. 3rd ed., 1965 Obtain from Iowa State University Press, Ames, Iowa.

Eating for Good Health by F. J. Stare. 1964 Obtain from Doubleday and Company, Inc., Garden City, N.Y.

United States Government Diet Book: The Authorized Publication on How to Reduce. U.S.D.A. Obtain from Superintendent of Documents. U.S. Government Printing Office, Washington, D.C.

Contact your County Extension Agent for other bulletins in this series for homemakers with physical limitations.